



McComb Recreation Department
PAINTING FOR FUN CLASS \$25.00

Subject Matter: PUMPKIN

Date: OCT. 25, 2016 6:00 PM



(Participant) Last Name First

Address: _____

Telephone: _____ Birth date: _____

Do you have health insurance: Y___ N___ (Name of Insurance) _____

List any medical problems that may limit physical activity.

Person to notify in case of emergency. Phone No.

Email Address: _____

RELEASE OF LIABILITY

In consideration of _____ participation in the McComb Recreation Department's, Painting For Fun Class for the dates of October 25th, 2016, I intending to be legally bound, hereby, waive, and decline any and all rights and claims for damages I may have against the McComb Recreation Department, City of McComb, sponsors, and their representatives, successors and assigns for any and all injuries suffered by myself during the duration of the Painting Class.

I hereby authorize McComb Recreation Department's instructor to act for me according to their judgment in an emergency requiring medical attention.

I HAVE READ THIS RELEASE.

Participant's Signature

Date

For Official Use

Fee Paid _____ **Receipt #** _____ **Date** _____ **Verified By** _____